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Substitute for form 1449/PTO (Revised 07/2005)					Complete if Known								
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					First Named Inventor								
INFORMATION DISCLOSURE					Group Art Unit			O1	Keith A. Etling				
STATEMENT BY APPLICANT					Group Art Offic				3070				
(Use as many sheets as necessary)					Examiner Name				Alison K. Pickard				
Sheet 1 of 1					Attorney Docket Number			ımber					
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Examiner Signature		/Alison Pickard							Date Considered	05/31/2007			

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*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through
citation if not in conformance and not considered. Include copy of this form with next communication to applicant.
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